

Mailing List

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To register, follow these easy steps:

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listserv@qualityindicators.ahrq.gov
2. On the subject line, type: Subscribe.
(For example: Subscribe)
3. In the body of the message type:
sub Quality_Indicators-L and your full name. (For example: sub Quality_Indicators-L John Doe)

You will receive a message confirming that you are signed up.

User Tools and Support

- Software to compute QI rates
- A detailed users' guide to the *Inpatient Quality Indicators*
- Technical specifications
- Methodology to create composite measures
- Model report
- Frequently asked questions
- QI Support Team (support@qualityindicators.ahrq.gov or voice mailbox (toll free) at 888-512-6090).

The AHRQ QI software is available for SAS® and Windows®.

QI Web site: www.qualityindicators.ahrq.gov

AHRQ
AHRQ Pub. No. 10-M043-2
Replaces AHRQ Pub. No. 09-M029-2
July 2010

**U.S. Department of
Health and Human Services**
Agency for Healthcare Research and Quality
540 Gaither Road
Rockville, Maryland 20850

AHRQ Quality Indicators

Inpatient Quality Indicators

*A tool to help assess the quality of care
to adults in the hospital*



Agency for Healthcare Research and Quality
Advancing Excellence in Health Care • www.ahrq.gov

Inpatient Quality Indicators—

- Can be used to help hospitals identify potential problem areas that might need further study, as well as for quality improvement, comparative public reporting, trending, and pay-for-performance initiatives.
- Can provide an indirect measure of in-hospital quality of care by using administrative data found in a typical discharge record.
- Include *mortality* indicators for conditions or procedures for which mortality can vary from hospital to hospital.
- Include *utilization* indicators for procedures for which utilization varies across hospitals or geographic areas.
- Include *volume* indicators for procedures for which outcomes may be related to the volume of those procedures performed.
- Are free and publicly available.
- Include risk adjustment where appropriate.
- Can be downloaded at www.qualityindicators.ahrq.gov/iqi_download.htm.

The *Inpatient Quality Indicators* are part of a set of software modules of the Agency for Healthcare Research and Quality (AHRQ) **Quality Indicators** (QIs) developed by the University of California, San Francisco–Stanford University Evidence-based Practice Center and the University of California, Davis under a contract with AHRQ. The *Inpatient Quality Indicators* were originally released in 2002.



The *Inpatient Quality Indicators* provide a perspective on hospital quality of care using hospital administrative data, which are readily available and relatively inexpensive to use.

Mortality rates for conditions

- Acute myocardial infarction (AMI)
- AMI without transfer
- Congestive heart failure
- Gastrointestinal hemorrhage
- Hip fracture
- Pneumonia
- Acute stroke

Mortality rates for procedures

- Abdominal aortic aneurysm repair
- Coronary artery bypass graft
- Craniotomy
- Esophageal resection
- Hip replacement
- Pancreatic resection
- Percutaneous transluminal coronary angioplasty
- Carotid endarterectomy

Hospital-level procedure utilization rates

- Cesarean section delivery
- Primary cesarean delivery
- Vaginal birth after cesarean, uncomplicated
- Vaginal birth after cesarean, all
- Incidental appendectomy in the elderly
- Bilateral cardiac catheterization
- Laparoscopic cholecystectomy

Area-level utilization rates (e.g., county, State)

- Coronary artery bypass graft
- Hysterectomy
- Laminectomy or spinal fusion
- Percutaneous transluminal coronary angioplasty

Volume of procedures

- Abdominal aortic aneurysm repair
- Carotid endarterectomy
- Coronary artery bypass graft
- Esophageal resection
- Pancreatic resection
- Percutaneous transluminal coronary angioplasty

Other AHRQ Quality Indicators

AHRQ has other sets of QIs.

Prevention Quality Indicators—Indicators representing hospital admission rates for common ambulatory care-sensitive conditions. Hospitalization for these types of conditions can often be avoided with appropriate use of high-quality, community-based primary care services.

Patient Safety Indicators—Hospital- and area-level indicators that provide information on potential in-hospital complications and errors following surgeries, other procedures, and childbirth.

Pediatric Quality Indicators—Hospital- and area-level indicators that focus on potentially preventable complications and errors in pediatric patients treated in hospitals. Includes a subset of *Neonatal Quality Indicators*.

See www.qualityindicators.ahrq.gov for announcement of updates to AHRQ QI software, or sign up for personal notification (see “Mailing List” information on next page).

Endorsement

A number of QIs have been endorsed by the National Quality Forum (NQF). NQF reviews the endorsements periodically.



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User Tools and Support

- Software to compute QI rates
- A detailed users' guide to the *Prevention Quality Indicators*
- Technical specifications
- Methodology to create composite measures
- Model report
- Frequently asked questions
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July 2010

**U.S. Department of
Health and Human Services**
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Rockville, Maryland 20850

AHRQ Quality Indicators

Prevention Quality Indicators

*A tool to help assess quality and access to
health care in the community*



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Prevention Quality Indicators—

- Can be used to identify potential health care quality problem areas that might need further investigation.
- Can provide a check on primary care access or outpatient services in a community by using patient data found in a typical hospital discharge abstract.
- Can help public health agencies, State data organizations, health care systems, and others interested in improving health care quality in their communities.
- Are population based and adjusted for age and sex.
- Are publicly available without cost.
- Can be downloaded at www.qualityindicators.ahrq.gov/pqi_download.htm.

The *Prevention Quality Indicators* are part of a set of software modules of the Agency for Healthcare Research and Quality (AHRQ) **Quality Indicators** (QIs) developed by the University of California, San Francisco–Stanford University Evidence-based Practice Center and the University of California, Davis under a contract with AHRQ. The *Prevention Quality Indicators* were originally released in 2001.

The *Prevention Quality Indicators* represent hospital admission rates for the following ambulatory care-sensitive conditions in adult populations. “Ambulatory care-sensitive conditions” are conditions for which good outpatient care can potentially prevent the need for hospitalization, or for which early intervention can prevent complications or more severe disease. They are:

- Bacterial pneumonia
- Dehydration
- Urinary tract infections
- Perforated appendix
- Low birth weight
- Angina without procedure
- Congestive heart failure
- Hypertension
- Adult asthma
- Chronic obstructive pulmonary disease
- Uncontrolled diabetes
- Diabetes, short-term complications
- Diabetes, long-term complications
- Lower extremity amputations among patients with diabetes

Other AHRQ Quality Indicators

AHRQ has other sets of QIs.

Inpatient Quality Indicators—Hospital- and area-level indicators relating to utilization, mortality, and volume. Hospital-level indicators include in-hospital procedures for which outcomes can vary from hospital to hospital; area-level indicators include procedures for which inpatient utilization rates have been shown to vary by metropolitan statistical area.

Patient Safety Indicators—Hospital- and area-level indicators that provide information on potential in-hospital complications and errors following surgeries, other procedures, and childbirth.

Pediatric Quality Indicators—Hospital- and area-level indicators that focus on potentially preventable complications and errors in pediatric patients treated in hospitals. Includes a subset of *Neonatal Quality Indicators*.

See www.qualityindicators.ahrq.gov for announcement of updates to AHRQ QI software, or sign up for personal notification (see “Mailing List” information on next page).

Endorsement

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User Tools and Support

- Software to compute QI rates
- A detailed users' guide to the *Patient Safety Indicators*
- Technical specifications
- Methodology to create composite measures
- Model report
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AHRQ Quality Indicators

Patient Safety Indicators

*A tool to help assess quality and safety of
care to adults in the hospital*



Agency for Healthcare Research and Quality
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Patient Safety Indicators—

- Can be used to help hospitals and health care organizations assess, monitor, track, and improve the safety of inpatient care.
- Can be used for comparative public reporting and pay-for-performance initiatives.
- Can identify potentially avoidable complications that result from a patient's exposure to the health care system.
- Include *hospital-level* indicators to detect potential safety problems that occur during a patient's hospital stay.
- Include *area-level* indicators for potentially preventable adverse events that occur during a hospital stay to help assess total incidence within a region.
- Are publicly available at no charge to the user.
- Include risk adjustment where appropriate.
- Can be downloaded at www.qualityindicators.ahrq.gov/psi_download.htm.

The *Patient Safety Indicators* are part of a set of software modules of the Agency for Healthcare Research and Quality (AHRQ) **Quality Indicators** (QIs) developed by the University of California, San Francisco–Stanford University Evidence-based Practice Center and the University of California, Davis under a contract with AHRQ. The *Patient Safety Indicators* were originally released in 2003.

The *Patient Safety Indicators* provide a perspective on potential complications and errors resulting from a hospital admission.

Hospital-level indicators

- Death in low-mortality diagnosis-related groups
- Pressure ulcer
- Death among surgical inpatients with treatable serious complications
- Foreign body left in during procedure
- Iatrogenic pneumothorax
- Central venous catheter-related bloodstream infections
- Postoperative hip fracture
- Postoperative hemorrhage or hematoma
- Postoperative physiologic and metabolic derangements
- Postoperative respiratory failure
- Postoperative pulmonary embolism or deep vein thrombosis
- Postoperative sepsis
- Postoperative wound dehiscence
- Accidental puncture or laceration
- Transfusion reaction
- Birth trauma—injury to neonate
- Obstetric trauma—vaginal delivery with instrument
- Obstetric trauma—vaginal delivery without instrument

Area-level indicators (e.g., county, State)

- Foreign body left in during procedure
- Iatrogenic pneumothorax
- Central venous catheter-related bloodstream infection
- Accidental puncture or laceration
- Postoperative hemorrhage or hematoma
- Postoperative wound dehiscence
- Transfusion reaction

Other AHRQ Quality Indicators

AHRQ has other sets of QIs.

Prevention Quality Indicators—Indicators representing hospital admission rates for common ambulatory care-sensitive conditions; hospitalization for these conditions can often be avoided with appropriate use of community-based primary care.

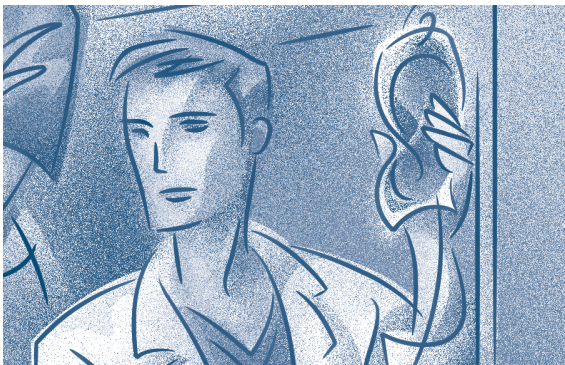
Inpatient Quality Indicators—Hospital- and area-level indicators relating to utilization, mortality, and volume. Hospital-level indicators include inhospital procedures for which outcomes can vary from hospital to hospital; area-level indicators include procedures for which inpatient utilization rates have been shown to vary by metropolitan statistical area.

Pediatric Quality Indicators—Hospital- and area-level indicators that focus on potentially preventable complications and errors in pediatric patients treated in hospitals. Includes a subset of *Neonatal Quality Indicators*.

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AHRQ
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Replaces AHRQ Pub. No. 09-M029-3
July 2010

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AHRQ Quality Indicators

Pediatric Quality Indicators

*A tool to help assess quality for children
in the hospital and in the community*



Agency for Healthcare Research and Quality
Advancing Excellence in Health Care • www.ahrq.gov

Pediatric Quality Indicators—

- Are used to help identify health care quality and safety problem areas in the hospital that need further investigation, as well as for comparative public reporting, trending, and pay-for-performance initiatives.
- Can provide a check on children's primary care access or outpatient services in a community by using patient data found in a typical hospital discharge abstract.
- Apply to special characteristics of the pediatric population.
- Include risk adjustment where appropriate.
- Include *hospital-level* indicators to detect potential safety problems that occur during a patient's hospital stay.
- Include *area-level* indicators, which are conditions that may be prevented with good outpatient care.
- Are publicly available without cost.
- Can be downloaded at www.qualityindicators.ahrq.gov/pdi_download.htm.

The *Pediatric Quality Indicators* are part of a set of software modules of the Agency for Healthcare Research and Quality (AHRQ) **Quality Indicators** (QIs) developed by Battelle Memorial Institute, Stanford University, and the University of California, Davis under a contract with AHRQ. The *Pediatric Quality Indicators* were released in 2006.

The *Pediatric Quality Indicators* provide a perspective on potential complications and errors resulting from a hospital admission among children, adolescents, and, where specified, neonatal.

Hospital-level indicators

- Accidental puncture or laceration
- Pressure ulcer
- Foreign body left in during procedure
- Central venous catheter-related bloodstream infections
- Iatrogenic pneumothorax in neonates
- Iatrogenic pneumothorax
- Neonatal mortality
- Bloodstream infections in neonates
- Pediatric heart surgery mortality
- Pediatric heart surgery volume
- Postoperative hemorrhage or hematoma
- Postoperative respiratory failure
- Postoperative sepsis
- Postoperative wound dehiscence
- Transfusion reactions

Area-level indicators (e.g., county, State)

- Asthma admissions
- Diabetes short-term complications
- Gastroenteritis admissions
- Perforated appendix admissions
- Urinary tract infection admissions

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